



Disposable electrochemical aptasensor for gluten determination in food



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ABSTRACT

Reliable detection of decreasing amounts of gluten in food is the only way of ensuring the safety of all coeliac patients. Results obtained with the method of choice, immunochemical assays, are not entirely comparable and many of them are sandwich assays that cannot recognize hydrolyzed proteins. In this work, we propose a competitive electrochemical sensor based on a recently described aptamer targeting the gliadin immunodominant peptide 33-mer that triggers the coeliac disease. The sensing layer is built on the surface of a screen-printed carbon electrode (SPCE) by adsorption of streptavidin and subsequent peptide immobilization. A competition between the peptide and gluten proteins from samples for a defined concentration of biotinylated Gli 4 aptamer is established. The aptamer bound to the peptide on the surface is finally measured after enzyme labelling and chronoamperometric detection of an enzymatically obtained electrochemically active product. This method is able to detect as low as $0.113 \mu\text{g L}^{-1}$ of gliadin, which corresponds to $380 \mu\text{g kg}^{-1}$ of gluten in food, taking all dilutions and conversion factors into consideration, with a reproducibility lower than 11%. The aptasensor was applied to food samples with gluten contents above and below the legislated threshold for gluten-free labelling in the EU, obtaining good agreement with the official R5 immunochemical method.

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1. Introduction

Coeliac disease patients face the challenge to interpret a non-harmonized labelling in food across the world to avoid the offending compound that triggers their chronic autoimmune illness: gluten. This is in fact a mixture of storage proteins in wheat, barley, rye and possibly oat. The meaning of “gluten-free” label can vary from undetectable in Australia and New Zealand to 20 mg kg^{-1} in the European Union [1]. The latter was set since the advent of immunochemical methods based on R5 antibody [2]. Unfortunately, the established level is still harmful for specially sensitized individuals. A proposal to decrease this value to 3 mg kg^{-1} has been claimed [3] but the lack of more sensitive analytical methods along with the absence of a clinically proved maximum tolerated intake precludes its decrease so far.

Currently, there are two main groups of methods for gluten determination: those targeting directly the allergenic proteins or their peptide fragments, and those directed to identify DNA

sequences specific of the carrier cereals. However, only a few of them have seen the transition to point of care by integration into chemical sensors.

Electrochemical genosensors have recently emerged as a novel low-cost strategy to detect gluten in food samples using a gene encoding the immunodominant peptide 33-mer as a target [4]. In combination with a structured capture probe the sensor was able to discriminate wheat from other gluten-containing cereals [5] unlike real-time PCR methods [6]. Though good correlation between immunochemical and genosensor results has been reported for a set of samples, DNA-based methods are indirect methods because they do not measure the offending compounds. They are excellent for identification and complementary to ELISA assays in samples where proteins are lacking or are highly degraded.

Proteomic-based methods are powerful tools for identification of immunotoxic peptides from different cereal sources but only the combination of HPLC with electrospray ionization (ESI) and tandem mass spectrometry detection (LC-MS/MS) allows quantitation at low mg kg^{-1} level at expense of cumbersome and time-consuming extraction and digestion steps to avoid matrix effects [7]. The final peptide content, however, depends on the composition of the gluten sample and the yield of enzymatic digestion. It also requires

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